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POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 OFR 1.83) Declaration Submitted with Declaration Submitted after Initial Filling Date (1144 Filling Date	DEC	ARATION		Attorney Do	cket Number	GYN-0090	
PATENT APPLICATION (37 CFR 1.53) Declaration Submitted with Initial Filing OR Initial Filing (Surcharge (37 CFR 1.16(e)) required) Filing Date Group Art Unit Examiner Name As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Surgical Instrument and Method for Treating Female Urinary Incontinence (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application on which priority is claimed. Prior Foreign Application Country (MM/DD/YYYY) Not Claimed Attached?		OF ATTORNEY ITY OR DESIGN APPLICATION CFR 1.63) Declaration Submitted after Initial Filing (Surcharge		First Named	Inventor	Gene W. Kammere	
Application Number Filing Date					COMPLE	TE IF KNOWN	
Initial Filing OR Initial Filing (Surcharge (37 CFR 1.16(e)) required) Filing Date				Application 1	Number		
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Number(s) TES NO	Application	Country				d Attached	d?
	IAUIIIDEI (9)						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:	Additional foreign applic	ation numbers are liste	d on a supple	emental priorit	ty data sheet P	 TO/SB/02B attached h	ereto:

DECLARATION - Utility or Design Patent Application					
Thereby claim the benefit under 35 LLS C	. 119(e) of any United States provisional a	onlication(s) listed below.			
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the					
national or PCT international filing date of the Application Serial No.	Filing Date	Status			
Application Serial No.	r ming bate	Patented Patented Patented			
I hereby appoint:					
Practitioners at Customer Number	Place Customer Number Bar Code Label Here				
AND					
Practitioner(s) named below: Name Verne E. Kreger, Jr. Registration Number 35,231					
States Patent and Trademark Office conn	ecute the application identified above, and the secret the rewith	to transact air business in the Officeu			
Address all telephone calls to Verne E. Kreger, J					
Customer Number Direct all correspondence to:					
Name:					
Address:					
Address:					
City:	State:	ZIP			
Country	Telephone:	Fax:			

I hereby declare that all statements metall information and belief are believed to that willful false statements and the like U.S.C. 1001 and that such willful false issued thereon.	be true; and further ke so made are puni	that these sta shable by fine	tements were or imprisonme	made with the knowledge ent, or both, under 18	
NAME OF SOLE OR FIRST INVENTOR:	☐ A pet	tition has been fil	ed for this unsign	ed inventor	
Given Name (first and middle [if any]) Gene W.		Family Name or Surname	Kammerer		
Inventor's Signature			Date		
Residence: City East Brunswick	State NJ	Count	ry USA	Citizenship USA	
Mailing Address 14 Stephens Dr.	,			T	
City East Brunswick	State NJ	ZIP (JSA	Country 08816	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SECOND INVENTOR:	☐ A pet	ition has been fil	ed for this unsign	ed inventor	
Given Name (first and middle [if any]) Hans-Jochen Family Name or Surname Hoepffner					
Inventor's Signature			Date		
Residence: City Belle Mead	State NJ	Count	ry USA	Citizenship German	
Mailing Address 41 Matthews Farm Road					
City Belle Mead	State NJ	ZIP 0		Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF THIRD INVENTOR:	IRD INVENTOR: A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Susanne Family Name or Surname Landgrebe					
Inventor's Signature			Date		
Residence: City Sulfeld	State	Count	ry Germany	Citizenship German	
Mailing Address Zuckerhut 3					
City Sulfeld	State	ZIP 2	3867	Country Germany	



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF FOURTH INVENTOR:	ME OF FOURTH INVENTOR: A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Brian		Family Name or Surname	Luscombe		
Inventor's Signature			Date		
Residence: City Branchburg	State NJ	Count	t ry USA	Citizenship USA	
Mailing Address 51 Vollers Dr.					
City Branchburg	State NJ	ZIP 0	8876-3408	Country USA	